

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) OHIO FIRST PAC			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00666750 </div>		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on					
Full Name of Payee MAJORITY STRATEGIES, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 16 / 2018		
Mailing Address 12854 KENAN DR STE 145			Amount 52307.33		
City JACKSONVILLE		State FL	Zip Code 32258		Transaction ID : SE.4189
Purpose of Expenditure PRINTING/POSTAGE		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY 04 / 16 / 2018	
Name of Federal Candidate RENACCI, JAMES B, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought			277691.99		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee MAJORITY STRATEGIES, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 16 / 2018		
Mailing Address 12854 KENAN DR STE 145			Amount 25000.00		
City JACKSONVILLE		State FL	Zip Code 32258		Transaction ID : SE.4197
Purpose of Expenditure MEDIA PLACEMENT		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY 04 / 16 / 2018	
Name of Federal Candidate RENACCI, JAMES B, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought			302691.99		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			77307.33		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			77307.33		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>DOZIER, JULIE, ,</u>			[Electronically Filed]		Date MM / DD / YYYY 06 / 29 / 2018